

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

ALAMEDA COUNTY TREASURER

1221 OAK STREET

OAKLAND CA

94612

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.03911791

Gross Claim	\$	995,890.53
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	995,890.53
YTD Amount:	\$	4,380,472.86

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A

PAYMENT ISSUE DATE: 12/27/2012

ALPINE COUNTY TREASURER

PO BOX 217

MARKLEEVILLE CA 96120

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00010612

Gross Claim	\$	2,701.68
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	2,701.68
YTD Amount:	\$	11,883.46

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
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AMADOR COUNTY TREASURER

810 COURT STREET

JACKSON CA 95642

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

<u>Total amount collected:</u>	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00132859

Gross Claim	\$	33,824.15
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	33,824.15
YTD Amount:	\$	148,777.79

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REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE CA 95965

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00893807

Gross Claim	\$	227,551.50
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	227,551.50
YTD Amount:	\$	1,000,896.35

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CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00136296

Gross Claim	\$	34,699.17
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	34,699.17
YTD Amount:	\$	152,626.84

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COLUSA COUNTY TREASURER

546 JAY ST

COLUSA CA

95932

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00106887

Gross Claim	\$	27,212.02
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	27,212.02
YTD Amount:	\$	119,693.72

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CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ CA 94553

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.02011996

Gross Claim	\$	512,227.71
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	512,227.71
YTD Amount:	\$	2,253,058.47

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DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY CA 95531

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00127153

Gross Claim	\$	32,371.48
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	32,371.48
YTD Amount:	\$	142,388.39

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EL DORADO COUNTY TREASURER

360 FAIR LANE

PLACERVILLE CA 95667

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00494732

Gross Claim	\$	125,952.26
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	125,952.26
YTD Amount:	\$	554,007.14

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FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.02544470

Gross Claim	\$	647,788.59
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	647,788.59
YTD Amount:	\$	2,849,329.57

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GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS CA 95988

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00122313

Gross Claim	\$	31,139.28
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	31,139.28
YTD Amount:	\$	136,967.64

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HUMBOLDT COUNTY TREASURER

825 FIFTH STREET ROOM 125

EUREKA CA

95501

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00862799

Gross Claim	\$	219,657.27
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	219,657.27
YTD Amount:	\$	966,173.18

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IMPERIAL COUNTY TREASURER

940 WEST MAIN STREET

EL CENTRO CA 92243 2863

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00880356

Gross Claim	\$	224,127.06
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	224,127.06
YTD Amount:	\$	985,833.75

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INYO COUNTY TREASURER

P O BOX O

INDEPENDENCE CA 93526

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00165903

Gross Claim	\$	42,236.72
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	42,236.72
YTD Amount:	\$	185,780.27

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KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO CA 95798 1240

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.01721220

Gross Claim	\$	438,199.97
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	438,199.97
YTD Amount:	\$	1,927,443.24

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KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00445852

Gross Claim	\$	113,508.05
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	113,508.05
YTD Amount:	\$	499,271.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
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LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT CA 95453

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00199460

Gross Claim	\$	50,779.89
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	50,779.89
YTD Amount:	\$	223,357.82

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LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

Allocation of Sales Tax-Local Realignment, Public Health

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00134019

Gross Claim	\$	34,119.47
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	34,119.47
YTD Amount:	\$	150,076.17

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.31055686

Gross Claim	\$	7,906,369.14
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	7,906,369.14
YTD Amount:	\$	34,776,545.83

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

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MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00444444

Gross Claim	\$	113,149.60
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	113,149.60
YTD Amount:	\$	497,694.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

MARIN COUNTY TREASURER

PO BOX 4220

CIVIC CENTER

SAN RAFAEL CA

94913

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00978122

Gross Claim	\$	249,016.99
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	249,016.99
YTD Amount:	\$	1,095,313.34

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA CA 95338

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00071281

Gross Claim	\$	18,147.20
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	18,147.20
YTD Amount:	\$	79,821.36

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH CA

95482

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

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Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00285164

Gross Claim	\$	72,599.00
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	72,599.00
YTD Amount:	\$	319,330.24

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

MERCED COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 981311

WEST SACRAMENTO 95798-1311

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00629714

Gross Claim	\$	160,316.90
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	160,316.90
YTD Amount:	\$	705,161.67

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

MODOC COUNTY TREASURER

204 COURT ST RM 101

ALTURAS CA

96101

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00079120

Gross Claim	\$	20,142.91
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	20,142.91
YTD Amount:	\$	88,600.17

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

MONO COUNTY TREASURER

P O BOX 495

BRIDGEPORT CA 93517

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00114139

Gross Claim	\$	29,058.29
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	29,058.29
YTD Amount:	\$	127,814.62

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00812079

Gross Claim	\$	206,744.63
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	206,744.63
YTD Amount:	\$	909,376.61

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

NAPA COUNTY TREASURER
1195 THIRD STREET ROOM 108

NAPA CA 94559 3035

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00419177

Gross Claim	\$	106,716.95
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	106,716.95
YTD Amount:	\$	469,399.37

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY CA 95959

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00269975

Gross Claim	\$	68,732.08
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	68,732.08
YTD Amount:	\$	302,321.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.06443975

Gross Claim	\$	1,640,551.26
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,640,551.26
YTD Amount:	\$	7,216,044.42

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

PLACER COUNTY TREASURER

2976 RICHARDSON DRIVE

AUBURN CA

95603

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00380643

Gross Claim	\$	96,906.70
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	96,906.70
YTD Amount:	\$	426,247.96

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY CA

95971

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00113417

Gross Claim	\$	28,874.48
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	28,874.48
YTD Amount:	\$	127,005.79

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO CA 95812 4035

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.03289207

Gross Claim	\$	837,388.83
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	837,388.83
YTD Amount:	\$	3,683,294.58

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.03445504

Gross Claim	\$	877,179.99
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	877,179.99
YTD Amount:	\$	3,858,318.80

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SAN BENITO COUNTY TREASURER

COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER CA

95023

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00159151

Gross Claim	\$	40,517.75
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	40,517.75
YTD Amount:	\$	178,219.30

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SAN BERNARDINO COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.03996868

Gross Claim	\$	1,017,550.01
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,017,550.01
YTD Amount:	\$	4,475,743.16

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST SACRAMENTO 95798 0304

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.07799922

Gross Claim	\$	1,985,757.53
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,985,757.53
YTD Amount:	\$	8,734,450.95

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

95814-2920

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.05924516

Gross Claim	\$	1,508,303.83
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,508,303.83
YTD Amount:	\$	6,634,347.68

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.01529154

Gross Claim	\$	389,302.49
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	389,302.49
YTD Amount:	\$	1,712,365.91

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00459189

Gross Claim	\$	116,903.48
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	116,903.48
YTD Amount:	\$	514,205.31

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.01397274

Gross Claim	\$	355,727.58
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	355,727.58
YTD Amount:	\$	1,564,685.03

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00838718

Gross Claim	\$	213,526.57
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	213,526.57
YTD Amount:	\$	939,206.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SANTA CLARA COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.03392573

Gross Claim	\$	863,704.45
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	863,704.45
YTD Amount:	\$	3,799,046.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ CA 95061

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00556854

Gross Claim	\$	141,767.70
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	141,767.70
YTD Amount:	\$	623,572.73

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00771515

Gross Claim	\$	196,417.57
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	196,417.57
YTD Amount:	\$	863,952.22

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE CA 95936 0376

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00026775

Gross Claim	\$	6,816.56
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	6,816.56
YTD Amount:	\$	29,983.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA CA

96097

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00208334

Gross Claim	\$	53,039.10
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	53,039.10
YTD Amount:	\$	233,295.04

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SOLANO COUNTY TREASURER TAX COLLECTOR

675 TEXAS ST STE 1900

FAIRFIELD CA

94533 6337

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.01114865

Gross Claim	\$	283,829.96
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	283,829.96
YTD Amount:	\$	1,248,439.88

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO CA 95812 1204

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.01734410

Gross Claim	\$	441,557.97
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	441,557.97
YTD Amount:	\$	1,942,214.18

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO CA

95353 3052

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.01168672

Gross Claim	\$	297,528.52
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	297,528.52
YTD Amount:	\$	1,308,693.63

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY CA

95992

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00403600

Gross Claim	\$	102,751.25
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	102,751.25
YTD Amount:	\$	451,956.37

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF CA 96080

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00274331

Gross Claim	\$	69,841.06
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	69,841.06
YTD Amount:	\$	307,199.30

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

TRINITY COUNTY TREASURER
PO BOX 1297

WEAVERVILLE CA 96093 1297

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00117460

Gross Claim	\$	29,903.77
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	29,903.77
YTD Amount:	\$	131,533.19

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA CA 93291

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.01120899

Gross Claim	\$	285,366.14
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	285,366.14
YTD Amount:	\$	1,255,196.82

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA CA 95370

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00211074

Gross Claim	\$	53,736.66
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	53,736.66
YTD Amount:	\$	236,363.32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO CA 95798 0307

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.01334317

Gross Claim	\$	339,699.55
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	339,699.55
YTD Amount:	\$	1,494,184.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND CA

95695

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00370281

Gross Claim	\$	94,268.67
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	94,268.67
YTD Amount:	\$	414,645.01

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

YUBA COUNTY TREASURER

915 8TH ST STE 103

MARYSVILLE CA 95901 5273

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00354044

Gross Claim	\$	90,134.94
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	90,134.94
YTD Amount:	\$	396,463.24

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY CA 94704

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00143778

Gross Claim	\$	36,603.99
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	36,603.99
YTD Amount:	\$	161,004.42

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

LONG BEACH CITY TREASURER

333 W OCEAN BL

LONG BEACH CA 90802

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00644648

Gross Claim	\$	164,118.90
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	164,118.90
YTD Amount:	\$	721,884.95

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200150A
PAYMENT ISSUE DATE: 12/27/2012

PASADENA CITY TREASURER

PO BOX 7115

PASADENA CA

91109 7215

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 11/16/2012 TO: 12/15/2012

Total amount collected:	\$217,424,181.49	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$25,458,684.44	County/City Ratio:	0.00212606

Gross Claim	\$	54,126.69
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	54,126.69
YTD Amount:	\$	238,079.20